| PLUMBING APPLICATION | | Maine Dept. Health & Human Services Div of Environmental Health , 11 SHS (207) 287-5672 Fax: (207) 287-4172 | | | |
|---|--|--|------------------------|-------------------------------------|--|
| PROPERTY ADDRESS | | >> CAUTION: LPI APPROVAL REQUIRED << | | | |
| City, Town, or Plantation | | Town/City LAMO/NE Permit # 1988 | | | |
| Street or Road 154 Partridge Cove Rd. | | Date Permit Issued 5/12/2 | 6 Fee: \$_ | /80 © Double Fee Charged [] | |
| Subdivision, Lot # | | Lebera Albritt (Sa) L.P.I. # 394 | | | |
| ///////PROPERTY OWNERS NAME////// | | Land Disserbing Ingranter Compture | | | |
| Name (last, first, MI) / Owner | | Fee: \$ /80 State min. fee \$ Locally adopted fee Copy: [] Owner [] Town [] State Map # Lot #_/0 | | | |
| Katie Miles / Kyle + Paige Mart Applicant Mailing Address | | The Internal Plumbing Fixtures and Piping shall not be installed until a | | | |
| of 11 MOX NON CN. HONCOCK 1/2 | | Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the plumbing system in accordance | | | |
| Owner/Applicant Nuble Harting & Plumbing (CC | | with this application and the Maine Internal Plumbing Rules. | | | |
| Daytime Tel. # 207-460-6794 | | CAUTION: INSPECTION REQUIRED I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules. | | | |
| OWNER OR APPLICANT STATEMENT I state and acknowledge that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the | | | | | |
| Department and/or Local Plumbing Inspector to deny a Permit. | | Date Approved (Rough-In) | | | |
| Signature of Owner or Applicant Date | | Local Plumbing Inspector Signature Date Approved (Final) | | | |
| | RMIT INFORMATION | | | | |
| | | re To Be Served | Plur | nbing To Be Installed By | |
| 1. SINGLE FAMIL 1. NEW PLUMBING | | LY DWELLING | 1. MASTER PLUMBER | | |
| INCTALLATION — | | | | MFG'D HOUSING | |
| 2. [] WIOI | DOLAIN OI | OD IN ON MODILE FIOME | | DEALER/MECHANIC | |
| 2. RELOCATED PLUMBING 3. MULTIPLE FA 4. OTHER-SPEC | | AMILY DWELLING | | 3. PUBLIC UTILITY EMPLOYEE | |
| | | 4. PROPERTY OWNER | | PROPERTY OWNER | |
| | | CIFY | LICENSE # IMISI8111216 | | |
| Hook-Up & Piping Relocation Maximum of 1 Hook-Up Numbe | | Column 2 Type of Fixture | Numbe | Column 1 er Type of Fixture | |
| HOOK-UP: to public sewer in | 13 | Hosebibb / Sillcock | 12 | Bathtub (and Shower) | |
| those cases where the connection is not regulated and inspected by the local Sanitary District | 11 | Floor Drain | 11 | Shower (Separate) | |
| OR | 1 | Urinal | 14 | Sink | |
| HOOK UP: to an existing subsurface | | Drinking Fountain | | Wash Basin | |
| wastewater disposal system | | Indirect Waste | 13 | Water Closet (Toilet) | |
| PIPING RELOCATION: of sanitar lines, drains, and piping without | у | Waste Treatment Softener, Filter, etc. | | Clothes Washer | |
| new fixtures | | Grease / Oil Separator | 1 1 | Dish Washer | |
| | | Dental Cuspidor | | Garbage Disposal | |
| | | Bidet | | Laundry Tub | |
| OR | | Other: | - 1 | Water Heater | |
| TRANSFER FEE | | Fixtures (Subtotal) | | ////Fixtures (Subtotal)//// | |
| (\$10.00) | 19 | Column 2 | 13 | Column 1 ////Fixtures (Subtotal) | |
| | I | | 4 | Column 2 | |
| | | 17 | Total Fixtures | | |
| | | 170 | //////Fixture Fee | | |
| | more of the control o | | 10 | /////Transfer Fee///// | |
| Charper - Tourn - State - Dev 05/2015 | | | | Hook-Up & Relocation Fee Permit Fee | |
| ☐ Owner ☐ Town ☐ State Rev. 05/2015 | | | | Permit Fee (Total) | |